

THE CLINIC BULLETIN

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NO. 307

THE EFFECT OF KETONEMIA ON THE COURSE OF EPILEPSY

Interest in the treatment of essential epilepsy has been again aroused by the favorable results of prolonged fasting reported from the Presbyterian Hospital in New York by Dr. H. R. Geyelin. A fairly large number of patients with severe cases of epilepsy were subjected by Dr. Geyelin to periods of absolute fasting and a good proportion of these patients remained free from epileptic seizures during the fasting period and for several months after their return to normal diets. It is necessary to maintain the utmost conservatism in drawing conclusions from the results of therapeutic measures in this disease, since the interval between attacks, even in the absence of therapy, may be very long, and also because so many procedures, which at one time or another had been thought curative, have failed in the end. Nevertheless, Dr. Geyelin's results are promising.

It has occurred to us that the benefit of Dr. Geyelin's procedure may be dependent on the ketonemia which must result from such fasts and that possibly equally good results could be obtained if a ketonemia were produced by some other means. The ketone bodies, acetoacetic acid and its derivatives, (b- oxybutyric acid and acetone) are formed from fat and protein whenever a disproportion exists between the amount of fatty acid and the amount of sugar actually burning in the tissues. The recent work of Shaffer makes it highly probable that the sugar enters into a definite chemical di-molecular reaction with acetoacetic acid. In any case, as has long been known, it is possible to provoke ketogenesis by feeding diets which are very rich in fat and very low in carbohydrate. It is proposed, therefore, to try the effect of such ketogenic diets on a series of epileptics.

In choosing cases for study we are anxious to take only patients with so-called essential epilepsy who are having attacks of grand mal or psychic equivalents at fairly frequent intervals, two or more a week. We desire to place such patients in the hospital where the food intake can be quantitatively controlled and where the effects produced may be followed by repeated analysis of blood and urine.

R. M. Wilder

EMERGENCY SURGEON

Dr. Adson is the emergency surgeon for this week, July 25 to 31 inclusive.

DEMONSTRATION AND MEETINGS TO-DAY

- 4:00 p. m., Assembly Room. Physicians' and surgeons' club clinical demonstration: Diseases of the esophagus. Dr. Vinson.
7:30 p. m., Assembly Room. Meeting of the permanent staff.
8:15 p. m., Lobby. Meeting of the general staff.

PERSONALS

Dr. and Mrs. C. H. Mayo are leaving Friday for Denver where they will be the guests of Dr. and Mrs. Balfour; they will return August 8.

Dr. Andres leaves to-day on a three week's vacation which he will spend in Seattle, Spokane, and Portland.

Dr. Fitz left last night for Massachusetts where he will spend a vacation.

STAFF PROGRAM

- Dr. Drennan: The bacteriology of 100 gallbladders. (15 minutes).
Discussion: Dr. MacCarty.
Dr. Luden:
(1) Diet and cancer. (5 minutes).
(2) Visualizing the size of the body cells and of their chemical supplies in the blood. (10) minutes.
Dr. Stokes: Report of the meeting of the American Dermatological Association and the American Medical Association. (10 minutes).
Note—Papers are presented in abstract, not read. Time limit as stated above.

SURGICAL CONSULTANTS

Wednesday, July 27

- 9:00 a. m. to 12:00 m. Dr. Hunt
9:30 a. m. to 12:00 m. Dr. Lockwood
10:00 a. m. to 12:30 p. m. Dr. Masson
2:00 p. m. to 4:00 p. m. Dr. Hedblom
2:30 p. m. to 4:00 p. m. Dr. C. H. Mayo
2:30 p. m. to 4:00 p. m. Dr. Judd
2:30 p. m. to 5:30 p. m. Dr. Pemberton

Thursday, July 28

- 8:30 a. m. to 11:00 a. m. Dr. Harrington
9:00 a. m. to 12:00 m. Dr. Hedblom
2:00 p. m. to 4:00 p. m. Dr. Hunt
3:00 p. m. to 5:00 p. m. Dr. Lockwood
3:30 p. m. to 5:30 p. m. Dr. Masson